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To: Examiner D.J. Suthers
Group Art Unit 2615, USPTO

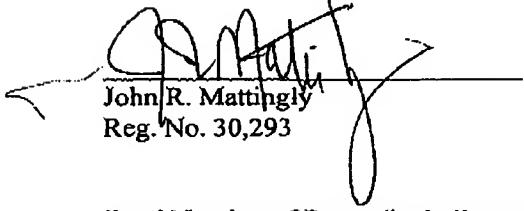
From: Mr. John R. Mattingly
MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re: USSN 10/849,056
Attorney Docket No.: KY-202

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

Transmittal;
Request for Continued Examination (RCE);
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Credit Card Payment Form in amount of \$1,170.00
in payment of RCE and second month extension of time fees.


John R. Mattingly
Reg. No. 30,293

January 15, 2009
Date

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Form PTO-1083

Patent

In RE application of R. INAGAKI

Case Docket No. KY-202

Serial No.: 10/849,056

Group Art Unit: 2614

For: MUTE CIRCUIT AND BTL AUDIO
AMPLIFIER APPARATUS

Examiner: D.J. Suthers

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Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) Claims Remaining After Amendment	(Col. 2) Highest No. Previously Paid For	(Col. 3) Present Extra
Total		Minus	** =
Indep.		Minus	*** =
<input type="checkbox"/> First presentation of Multiple Dependent Claims			

SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
Rate	Additional Fee		Rate	Additional Fee
X 25	\$		X 50	\$
X 100	\$		X 200	\$
X 180	\$		X 360	\$
Total	\$		Total	\$

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write '20' in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write '3' in this space.
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-1417 in the amount of \$_____.
- A Credit Card Payment Form in the amount of \$ 1,170.00 is attached for 2nd month EOT and RCE.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417.
 - Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
 - Any patent application processing fees under 37 CFR 1.17.
 - Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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By: 
 John R. Mattingly, Reg. No. 30,293
 Attorney for Appellant

Date: January 15, 2009